

SHARE

STATE OF NEW MEXICO

DEPARTMENT OF FINANCE AND ADMINISTRATION

Warrant/Voucher Information Sheet

969

VENDOR #



DATE 12/07/2011

Payee

\$ 605.00



Fund / Agency

000 66500

Document Number

AP 00275176

B4R

COD3

B4RCOD3

State of New Mexico

Voucher Batch Report

BusinessUnit 66500 Department of Health

Vouchers with Final Agency Approval But Not Yet Reviewed/Approved By DFA/FCD

AsofDate 12/02/2011

Voucher	Vchr	VchrLineDescr	Distr	Account	Fund	VendorName	1099	Accounting Period	PurchaseOrder	Invoice Number	Total Amount
Number	Line		Line#	Description			WithHold	Year	Month		

00275176	1	IS Meals & Lodging	1	542200	Employee I/S Meals & L	06101	MCGRATH BR-001	2012	11	0000083659 McGrath, B. 11.13	605.00
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Total For Voucher										605.00
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FCD Audit Bureau

Lycinda

RECEIVED
DEC 02 2011
DFA
FINANCIAL CONTROL

AGENCY NAME New Mexico Department of Health

**STATE OF NEW MEXICO
ITEMIZED SCHEDULE
OF TRAVEL EXPENSES**

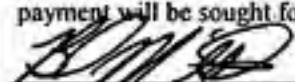
PAGE 2

DATE 11/13/11


AGENCY CODE 66500

VOUCHER NUMBER 00275176

NAME Brad McGrath		CAR LICENSE NUMBER GS2411		POST OF DUTY Roswell		PROPOSED (ADVANCE VOUCHER) <input type="checkbox"/>	
SOCIAL SECURITY NUMBER [REDACTED]		MODEL Ford		RESIDENCE Roswell		ACTUAL (RECOUPMENT VOUCHER) <input checked="" type="checkbox"/>	
NORMAL WORK DAY 8am TO 5pm		YEAR 2011					

DATE	TIME SHOW AM OR PM		CHARACTER OF EXPENDITURES <small>ENTER DESTINATION, NATURE, OF OFFICIAL BUSINESS, PARTY CONTACTED AND MISCELLANEOUS</small>	ODOMETER READINGS		AMOUNTS			
	DEPARTURE	ARRIVAL		ENTER START AND FINISH	NO. OF MILES	MILEAGE	PER DIEM	MISCELLANEOUS	TOTALS
11/13/11	6:00am		Depart Roswell to Santa Fe to meet with Secretary of Health				135.00	✓	135.00
11/14/11			overnight Santa Fe rate				135.00	✓	135.00
11/15/11			Overnight -Santa Fe rate				135.00	✓	135.00
11/16/11			overnight Santa Fe rate				85.00	✓	85.00
11/17/11			Depart Santa Fe to T or C to meet with Hospital Administrator and staff at NMSVH				85.00	✓	85.00
11/18/11		8:00pm	overnight Depart T or C to ABQ to meet Hospital Administrator and staff at SATC.				85.00	✓	85.00
			Overnight-ABQ				30.00	✓	30.00
			Depart ABQ to Roswell						
			Partial day per diem-14 hrs.						
PER DIEM IS BASED ON (CHECK ONE)			I certify that any payment sought on this voucher does not include reimbursement for alcoholic beverages; I further certify that no further payment will be sought for the travel/training covered by this voucher.  Employee Signature	TOTALS			605.00		605.00
ACTUAL <input type="checkbox"/>				Advance Amount @ 80%					
APPROVED RATES <input checked="" type="checkbox"/>				Adjusted Reimbursement					

☒ Check here if this claim is in compliance with the Nonroutine Reassignment provisions of the DFA regulations Governing the PerDiem and Mileage Act.

1. Brad McGrath
 do solemnly swear that the above claim for reimbursement is just and true in all respects and complies with the DFA Regulations Governing the Per Diem and Mileage Act.
 PAYEE SIGN HERE  11/22/11

03:54 11:05 AM


Summary | **Invoice Information** | **Payments** | **Voucher Attributes** | **Error Summary**





Business Unit: 66500
Voucher ID: 00275176
Voucher Style: Regular

Invoice Number: McGrath,B. 11.13-11.18.11
Invoice Date: 11/29/2011
Total: 605.00


Vendor: MCGRATH, BRADLEY K
NM REHABILITATION CENTER
ROSWELL, NM 88203

*Pay Terms:

Payment Information[Find](#) | [View All](#) First  1 of 1  Last **Scheduled Payment:** 1


*Remit to:  
Location: 001 
*Address: 1 
MCGRATH, BRADLEY K
NM REHABILITATION CENTER
31 GAIL HARRIS AVENUE
ROSWELL, NM 88203

Gross Amount: 605.00 USD
Discount: 0.00 USD ☐ Discount Denied
Late Charge

Scheduled Due: 11/29/2011 
Net Due: 11/29/2011
Discount Due:
Accounting Date:

Payment Method

*Bank: WFB10
*Account: B
*Method: CHK Check

Pay Group:
*Handling: RE
*Netting: N 

Message:[Messages](#)

Message will appear on remittance advice.

Summary | **Invoice Information** | **Payments** | **Voucher Attributes** | **Error Summary**

Business Unit: 66500

Invoice Number: McGrath,B. 11.13-11.18.11

Voucher ID: 00275176

Invoice Date: 11/29/2011

Voucher Style: Regular

Total: 605.00

Voucher Processing

☒ **Post Voucher**

☐ **Close Voucher**

☒ **Revalue Voucher**

☐ **Delete Voucher**

Saved


Accounting Instructions

***Accounting Template:** STANDARD 

Account At: Gross 

Match Action


***Status:**

Ready 

☐ **Pay UnMatched Voucher**

Transaction Currency

***Source:**

Tables 

***Currency:**

USD 

Rate Type:

CRRNT 

Exchange Rate:


1.00000000

Voucher Approval

***Approval:**

Specify at this Level 

Business Process:

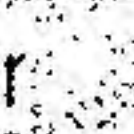
PROCESS_VOUCHERS 

Approval Rule Set:

Payment Approval Rule Set 1 

Self Billing Invoice

***SBI Num Option:**

Group Vouchers (Auto-Nur) 

SBI Number:

Prepayment

Prepayment Reference: 

☒ **Automatically Apply Prepayment**

☐ **Postpone Withholding**

Letter of Credit

Letter of Credit ID:  

Tax Group